

# GENERAL FACT SHEET

BILL NUMBER 05R-17

## BRIEF TITLE

City of Lincoln Investment Policy

## APPROVED DEADLINE

## REASON

## DETAILS

## POSITIONS/RECOMMENDATIONS

<p>The purpose of this Resolution is to:</p> <p>This policy sets forth the investment objectives and parameters for the management of all City funds except Pension and Permanent Trust Funds.</p>	Sponsor	City of Lincoln, Finance Department
	Program Departments, or Groups Affected	
	Applicants/Proponents	<p>Applicant</p> <p>Don Herz</p> <p>Finance Director</p> <p>City Department</p> <p>Finance</p> <p>Other</p>
<p>Discussion (Including Relationship to other Council Actions)</p>	Opponents	<p>Groups or Individuals</p> <p>Basis of Opposition</p>
	Staff Recommendations	<input type="checkbox"/> For <input type="checkbox"/> Against Reason Against
	Board or Commission Recommendation	BY <input type="checkbox"/> For <input type="checkbox"/> Against <input type="checkbox"/> No Action Taken <input type="checkbox"/> For with revisions or conditions (See Details column for conditions)
	CITY COUNCIL ACTIONS (For Council Use Only)	<input type="checkbox"/> Pass <input type="checkbox"/> Pass (As Amended) <input type="checkbox"/> Council Sub. <input type="checkbox"/> Without Recommendation <input type="checkbox"/> Hold <input type="checkbox"/> Do not Pass

**DETAILS**

**POLICY/PROGRAM IMPACT**

	<b>POLICY OR PROGRAM CHANGE</b>	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES   	
	<b>OPERATIONAL IMPACT ASSESSMENT</b>	Minimal - Change in reporting activity will be the major change.  	
	<b>FINANCES</b>		
	<b>COST AND REVENUE PROJECTIONS</b>	COST of total project:                      \$ COST of this Ordinance/ Resolution                      \$	
		RELATED annual operating Costs                      \$	
		INCREASE REVENUE EXPECTED/YEAR                      \$	
	<b>SOURCE OF FUNDS</b>	CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ % _____ \$ _____ % _____ \$ _____ %	
		NON CITY [Approximately] _____ \$ _____ % _____ \$ _____ % _____ \$ _____ % _____ \$ _____ % _____ \$ _____ %	
		<b>BENEFIT COST</b>	
		<input type="checkbox"/> Front Foot                      Average Assessment	
<input type="checkbox"/> Square Foot    \$ _____                      \$ _____			

APPLICABLE DATES: 1/14/2005

FACT SHEET PREPARED BY:

*Don Ziegler*

REVIEW BY:

REFERENCE NUMBER